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DATE: October 17, 2005

CLIENT-MATTER No.: 24207-10118

E 8 56

To:

NAME	FAX No.	PHONE No.
USPTO	571-273-8300	

FROM: Sabra-Anne R. Truesdale PHONE: (650) 335-7187

SENT BY: Dana Chevalier PHONE: (650) 943-5363

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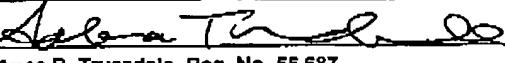
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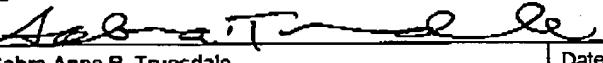
A1000/00103/DOCS/1403268.1

TRANSMITTAL FORM <i>(to be used for all correspondence during pendency of filed application)</i>		Application Number	10/814,924
		Filing Date	March 31, 2004
		First Named Inventor	David Benjamin Auerbach
		Group Art Unit Number	2171
		Examiner Name	Not Yet Known
Total Number of Pages in This Submission	2	Attorney Docket Number	24207-10118 (formerly 53051/297931)

ENCLOSURES (check all that apply)	
<input type="checkbox"/> Fee Transmittal Form (in duplicate) <input type="checkbox"/> Check Enclosed <input type="checkbox"/> Return Receipt Postcard <input type="checkbox"/> Response to Notice to File Missing Parts <input type="checkbox"/> Assignment & Recordation Cover Sheet <input type="checkbox"/> Declaration <input type="checkbox"/> Power of Attorney <input type="checkbox"/> Application Data Sheet <input type="checkbox"/> Information Disclosure Statement & PTO/SB/06A <input type="checkbox"/> Copies of IDS Cited References <input type="checkbox"/> Request for Corrected Filing Receipt <input type="checkbox"/> Request for Correction of Recorded Assignment <input type="checkbox"/> Amendment/Response: [] Page(s) <input type="checkbox"/> After Final <input type="checkbox"/> Status Request <input type="checkbox"/> Revocation and Substitute Power of Attorney	<input type="checkbox"/> Issue Fee Transmittal <input type="checkbox"/> Letter to Chief Draftsperson <input type="checkbox"/> Formal Drawing(s): [] Sheet(s) of Figure(s) [] <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (<i>Appeal Notice, Brief, Reply Brief</i>) <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> After Allowance Communication to Group <input checked="" type="checkbox"/> Correspondence Address Indication Form <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

REMARKS:

SIGNATURE OF ATTORNEY OR AGENT		
Signature:		
Attorney/Reg. No.:	Sabra-Anne R. Truesdale, Reg. No. 55,687	Dated: 10-17-05

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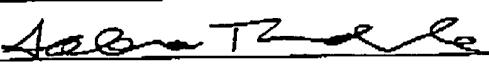
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Request for Customer Number (PTO/SB/125) submitted herewith.

In the following listed application(s) or patent(s):

Patent Number (if appropriate)	Application Number	Patent Date (if appropriate)	U.S. Filing Date
	10/541,476		09-30-2004
	10/749,439		12-31-2003
	10/749,440		12-31-2003
	10/749,620		12-31-2003
	10/750,105		12-31-2003
	10/750,109		12-31-2003
	10/765,014		01-26-2004
	10/813,818		03-31-2004
	10/814,365		03-31-2004
	10/814,414		03-31-2004
	10/814,487		03-31-2004
	10/814,766		03-31-2004
	10/814,773		03-31-2004
	10/814,908		03-31-2004
	10/814,924		03-31-2004
	10/815,158		03-31-2004
	10/854,060		05-26-2004
	10/872,504		06-22-2004
	10/881,643		06-30-2004
	10/882,059		06-30-2004
	10/882,066		06-30-2004
	10/948,710		09-23-2004
	11/018,812		12-20-2004
	11/026,616		12-31-2004
	11/026,681		12-31-2004

Typed Name	Sabra-Anne R. Truesdale	(check one)
Signature		<input type="checkbox"/> Applicant or Patentee
Date	10-17-05	<input type="checkbox"/> Assignee of record of the entire interest. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)
Address of signer:	Fenwick & West LLP Silicon Valley Center 801 California Street Mountain View, CA 94041 Tel.: (650) 335-7187 Fax.: (650) 938-5200	<input checked="" type="checkbox"/> Attorney or Agent of record
		55,687 (Reg. No.)

NOTE: Signature of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

Total of one form is submitted.

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